

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
(703) 746-4000

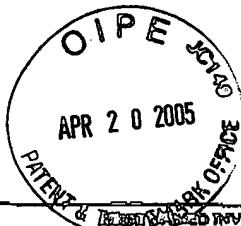
or Fax

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Exhibit 1 through 5 should be completed where appropriate. All further correspondence regarding the Patent, Advance Order and registration of trademarks filed will be mailed to the same correspondent (unless as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondent's address; and/or (b) indicating a separate "FEE ADDRESS" for transmission fee notifications).

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

2000 750 01/27/2005

OGILVY RENAULT  
1981 MCGILL COLLEGE AVENUE  
SUITE 1600  
MONTREAL, QC H3A 2Y3  
CANADA



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Certification of Mailing or Transmittal  
I hereby certify that this fee(s) transmitted is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being electronically transmitted to the USPTO (703) 746-4000, on the date indicated below.

Matthew M. Roy

(Postage paid)

Matthew M. Roy

(Priority)

April 20, 2005

(Date)

APPLICATION NO.	FILED DATE	ATTY/ENTTY INVENTION	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/662,337	09/14/2000	Kim B. Roberts	9-19928-135US KD/BM	2336

TITLE OF INVENTION: VALIDATION OF A CONNECTION BETWEEN ARBITRARILY END-POINTS IN A COMMUNICATIONS NETWORK USING AN AUGMENTED IP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	04/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
COLLINS, SCOTT M.	2145	703-124000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363):

Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.

"Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev. 02/02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, if:

(1) the name of up to 3 registered patent attorneys or agents OR, alternately,

(2) the name of a single firm (having up to 1 member or registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Ogilvy Renault

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (bold or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If no assignee is identified below, this document has been filed for retransmission as Form 37 CFA.1.11. Completing of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

NORTEL NETWORKS LIMITED

St. Laurent, Quebec, Canada

Please check the appropriate residence category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fees(s) are enclosed:

Issue Fee

Publication Fee (No small entity discount permitted)

Advance Order - # of Copies 2

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.

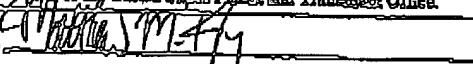
Payment by credit card Form PTO-2036 is enclosed.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-5113 (enclose an extra copy of this form).

5. Changes in Entity Status (from status indicated above)

a. Additional status SMALL ENTITY under 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(d)(2).

The Director of the USPTO is empowered to apply the Issue Fee and Publication Fee (if any) or to reapply any previously paid issue fee to the applicant, if identified above, without limitation by the number of days from the date of filing and independent of the status of the application, if the Director or agent of the applicant or other party in interest is located in the United States or its possessions or territories.

Authorized Signature: 

Date: April 20, 2005

Typed or printed name: Matthew M. Roy

Registration No. 48,074

This collection of information is required by 37 CFR V.9.1.1. The information is required to obtain or retain a benefit by the public which is to be provided by the USPTO to process, submit and/or examine an application form in the USPTO. Time will vary depending upon the individual case. Any comment on the burden of this form is welcome to complete Form 1-464, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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09662,337

04/21/2005 00000009 195119 04/21/2005 00000009 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

01 FC:1501 1400.00 DA

02 FC:0001 6.00 DA

PAGE 39 RCVD AT 4/20/2005 2:34:01 PM [Eastern Daylight Time] SVR:USPTO-EFXRF-2/0 \* DSN:7464000 \* CSID:613 230 6706 \* DURATION (mm:ss):03:44



**OGILVY  
RENAULT**

## Facsimile

Our Ref. 9-13528-135US MMR/sw

### Confidentiality Message

This communication sent by facsimile is confidential, may be privileged and is intended for the exclusive use of the addressee. Any other person is strictly prohibited from disclosing, distributing or reproducing it. If the addressee cannot be reached or is unknown to you, please inform us immediately by telephone (613) 780-8661 at our expense and delete this message and all copies. Thank you.

Number of pages including cover letter: 9

Date: April 20, 2005

From: Matthew M. Roy

Telephone: (613) 780-8659

E-mail: matroy@ogilvyrenault.com

To	Company	City	Fax
<b>MAIL STOP ISSUE FEE</b> Examiner: Scott M. Collins Art Unit: 2145	United States Patent Office – Facsimile Centre	Alexandria, VA	(703) 746-4000

## DUE DATE: APRIL 27, 2005

Re: United States Patent Application No. 09/662,337

Title : VALIDATION OF A CONNECTION BETWEEN ARBITRARY  
END-POINTS IN A COMMUNICATIONS NETWORK USING  
AN AUGMENTED SPE

Inventor :: ROBERTS, Kim B.

Assignee : Nortel Networks Limited

Our Ref. : 9-13528-135US MMR/sw

In response to the Notice of Allowance dated January 27, 2005, attached hereto is the issue fee payment together with related documentation.

**Shirley Wise**  
Assistant to Matthew M. Roy  
Ogilvy Renault  
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Barristers and Solicitors  
Patent and Trade-Mark Agents

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Continuing the practices of  
McIphen Demers  
Ogilvy Renault  
Swabey Ogilvy Renault



# OGILVY RENAULT

**Direct Dial: (613) 780-8659**

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[matroy@ogilvyrnault.com](mailto:matroy@ogilvyrnault.com)

**BY FACSIMILE (703-746-4000)**

Ottawa, April 20, 2005

**Mail Stop Issue Fee**

Commissioner for Patents  
United States Patent and Trademark Office  
P.O. Box 1450  
Alexandria, VA 22313-1450  
U.S.A.

Sir:

Re: United States Patent Application No. 09/662,337  
 Title : **VALIDATION OF A CONNECTION BETWEEN  
ARBITRARY END-POINTS IN A COMMUNICATIONS  
NETWORK USING AN AUGMENTED SPE**  
 Inventor : ROBERTS, Kim B.  
 Assignee : Nortel Networks Limited  
 Our Ref. : 9-13528-135US MMR/sw

In response to the Notice of Allowance dated January 27, 2005, enclosed are the following documents in relation to the above-identified patent application:

1. Transmittal Form, PTO Form SB/21.
2. Issue Fee Transmittal form.
3. "Fee Address" Indication form.
4. Fee Transmittal form (in duplicate) covering payment of the issue fee (\$1,400) and two printed copies of the issued patent (\$6.00).

An assignment was recorded on September 14, 2000 under Reel/Frame 011140/0254, from Kim B. Roberts to Nortel Networks Limited. The patent should therefore issue in the name of Nortel Networks Limited.



The Commissioner is hereby authorized to charge the above-noted fees and any additional fees which may be required, or credit any overpayment to our Account No. 19-5113.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Matthew M. Roy".

Matthew M. Roy, Reg. No. 48,074  
Agent of Record

MMR/sw  
Encls.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.  
PTO/SB/21 (09-04)  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/662,337
Filing Date	September 14, 2000
First Named Inventor	Kim B. ROBERTS
Art Unit	2145
Examiner Name	Scott M. Collins
Total Number of Pages in This Submission	8
Attorney Docket Number	9-13528-135US

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Cover letter, Issue Fee Transmittal, Fee Address" Indication.
<input type="checkbox"/> Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	OGILVY RENAULT		
Signature			
Printed name	Matthew M. ROY		
Date	April 20, 2005	Reg. No.	48,074

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

Matthew M. ROY

Date

April 20, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)  
Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

APR 20 2005  
P A T E N T & T R A D E M A R K S  
**FEE TRANSMITTAL**  
For FY 2005

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT (\$)** **1,406**

**Complete If Known**

Application Number	09/662,337
Filing Date	September 14, 2000
First Named Inventor	Kim B. ROBERTS
Examiner Name	Scott M. Collins
Art Unit	2145
Attorney Docket No.	9-13526-135US

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: **19-5113** Deposit Account Name: Ogilvy Renault

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		<b>Fees Paid (\$)</b>
	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

**Fee Description**

Each claim over 20 (including Reissues)

**Small Entity**

**Fee (\$)** **Fee (\$)**

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

**Total Claims**

**Extra Claims**

**Fee (\$)**

**Fee Paid (\$)**

**Multiple Dependent Claims**

**Fee (\$)** **Fee Paid (\$)**

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
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- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEES**

Non-English Specification, \$130 fee (no small entity discount)

**Fee Paid (\$)**

Other (e.g., late filing surcharge): 1501 Issue Fee (\$1400) and 8001-2 printed copies (\$6)

1,406

**SUBMITTED BY**

Signature

*Matthew M. Roy*

Registration No.  
(Attorney/Agent)

48,074

Telephone 613-780-8659

Name (Print/Type)

Matthew M. ROY

Date April 20, 2005

This collection of information is required by 37 CFR 1.166. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.